

116TH CONGRESS
1ST SESSION

S. 2116

To amend title XVIII of the Social Security Act to establish rules for payment for graduate medical education (GME) costs for hospitals that establish a new medical residency training program after hosting resident rotators for short durations.

IN THE SENATE OF THE UNITED STATES

JULY 15, 2019

Mr. MENENDEZ (for himself and Mr. BOOKER) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to establish rules for payment for graduate medical education (GME) costs for hospitals that establish a new medical residency training program after hosting resident rotators for short durations.

1 *Be it enacted by the Senate and House of Representa-
2 tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Supporting Graduate
5 Medical Education at Community Hospitals Act of 2019”.

6 **SEC. 2. FINDINGS.**

7 Congress makes the following findings:

1 (1) Graduate Medical Education or “GME”
2 training programs are of critical importance in de-
3 veloping the physician workforce.

4 (2) Current caps on GME training programs
5 under Medicare have been in place since 1997.

6 (3) Hospitals seeking to launch GME training
7 programs face barriers in establishing physician
8 training programs in community hospitals.

9 **SEC. 3. MEDICARE GME TREATMENT OF HOSPITALS ESTAB-**

10 **LISHING NEW MEDICAL RESIDENCY TRAIN-**
11 **ING PROGRAMS AFTER HOSTING MEDICAL**
12 **RESIDENT ROTATORS FOR SHORT DURA-**
13 **TIONS.**

14 (a) REDETERMINATION OF APPROVED FTE RESI-
15 DENT AMOUNT.—Section 1886(h)(2)(F) of the Social Se-
16 curity Act (42 U.S.C. 1395ww(h)(2)(F)) is amended—

17 (1) by inserting “(i)” before “In the case of”;
18 and

19 (2) by adding at the end the following:

20 “(ii) In applying this subparagraph to a
21 hospital that has not entered into a GME affili-
22 ation agreement (as defined by the Secretary
23 for purposes of paragraph (4)(H)(ii)), the Sec-
24 retary shall not provide for the establishment of
25 an FTE resident amount until such time as the

1 Secretary determines that the hospital has a
2 medical residency training program that trains
3 more than 1.0 full-time-equivalent resident in a
4 cost reporting period.

5 “(iii) In the case of a hospital with an ap-
6 proved FTE resident amount—

7 “(I) based on the training of less than
8 1.0 full-time-equivalent resident before Oc-
9 tober 1, 1997;

10 “(II) based on the training of—

11 “(aa) no more than 6.0 full-time-
12 equivalent residents in a medical resi-
13 dency training program in any cost
14 reporting period during the period be-
15 tween October 1, 1996, and Sep-
16 tember 30, 1997; and

17 “(bb) no more than 3.0 full-time-
18 equivalent residents on or after Octo-
19 ber 1, 1997; or

20 “(III) based on the training of no full-
21 time-equivalent residents in a medical resi-
22 dency training program for any 20 con-
23 secutive cost reporting periods beginning
24 on or after October 1, 1997,

1 the Secretary shall provide the hospital an op-
2 portunity to have a new FTE resident amount
3 established when the hospital begins training at
4 least 1.0 full-time equivalent resident (in the
5 case of a hospital described in subclauses (I or
6 III)) or more than 3.0 full-time-equivalent resi-
7 dents (in the case of a hospital described in
8 subclause (II)) for cost reporting periods begin-
9 ning on or after the date of the enactment of
10 this clause and in accordance with the method-
11 ology under the rules in effect as of October 1,
12 2015.”.

13 (b) REDETERMINATION OF FTE RESIDENT LIMITA-
14 TION.—Section 1886(h)(4)(H)(i) of the Social Security
15 Act (42 U.S.C. 1395ww(h)(4)(H)(i)) is amended—

16 (1) by inserting “(I)” before “The Secretary”;
17 and

18 (2) by adding at the end the following:

19 “(II) Under this clause the Secretary
20 shall not determine an adjustment in the
21 limitation applicable to a hospital under
22 subparagraph (F) until the hospital trains
23 more than 1.0 full-time equivalent resident
24 in a new medical residency training pro-
25 gram in a cost reporting period.

1 “(III) In the case of a hospital that
2 has a limitation under subparagraph (F) of
3 less than 1.0 full-time-equivalent resident
4 as of the date of the enactment of this sub-
5 clause based on training before October 1,
6 under this clause the Secretary shall
7 provide the hospital an opportunity to have
8 a new adjustment in such limitation deter-
9 mined when such hospital begins training
10 at least 1.0 full-time equivalent resident in
11 accordance with the methodology applica-
12 ble to hospitals under the rules in effect as
13 of October 1, 2015, and applied for cost
14 reporting periods beginning on or after the
15 date of the enactment of this subclause.

16 “(IV) In the case of a hospital that
17 has not reported full-time-equivalent resi-
18 dents in 20 consecutive cost reporting peri-
19 ods subsequent to October 1, 1997, under
20 this clause the Secretary shall provide the
21 hospital an opportunity to have a new ad-
22 justment in such limitation determined
23 when such hospital begins training at least
24 1.0 full-time equivalent resident in accord-
25 ance with the methodology applicable to

1 hospitals under the rules in effect as of Oc-
2 tober 1, 2015, and applied for cost report-
3 ing periods beginning on or after the date
4 of the enactment of this subclause.

5 “(V) In the case of a hospital for
6 which an adjustment in the limitation ap-
7 plicable to a hospital under subparagraph
8 (F) is based on the training of no more
9 than 3.0 full-time-equivalent residents in a
10 medical residency training program in a
11 cost reporting period beginning on or after
12 October 1, 1997, and before the date of
13 the enactment of this subclause, the Sec-
14 retary shall provide the hospital an oppor-
15 tunity to have a new adjustment in such
16 limitation determined when the hospital be-
17 gins training more than 3.0 full-time-
18 equivalent residents in accordance with the
19 methodology applicable to hospitals under
20 the rules in effect as of October 1, 2015,
21 and applied for cost reporting periods be-
22 ginning on or after the date of the enact-
23 ment of this subclause.”.

24 (c) EFFECTIVE DATE.—The amendments made by
25 this section shall apply to payment under section 1886 of

- 1 the Social Security Act (42 U.S.C. 1395ww) for cost re-
- 2 porting periods beginning on or after the date of the en-
- 3 actment of this Act.

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